

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		13	8/09/01
FORMALITY REVIEW	A.T	1071	09/21/01

Response

H-S

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 (Through numeral) Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	01/16/01
2	03/04/01
3	✓
4	✓
5	✓
6	✓
7	✓
8	N
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	N
20	✓
21	✓
22	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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BEST AVAILABLE COPY